

**PATENT NUMBER**

1. <b>MH</b> O.I.P.E. SCANNED <b>\$</b> O.A. <b>CTH</b>	PATENT DATE
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<b>ISSUING CLASSIFICATION</b>								
<b>ORIGINAL</b>			<b>CROSS REFERENCE(S)</b>					
<b>CLASS</b>	<b>SUBCLASS</b>		<b>CLASS</b>	<b>SUBCLASS (ONE SUBCLASS PER BLOCK)</b>				
<b>INTERNATIONAL CLASSIFICATION</b>								

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<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>			<b>CLAIMS ALLOWED</b>	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
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<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____ _____ _____	_____ (Primary Examiner) (Date)			<b>ISSUE FEE</b>	
				Amount Due	Date Paid
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)			<b>ISSUE BATCH NUMBER</b>	

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